

## How to Tackle Diabetic Retinopathy in a Megalopolis like Mexico?



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Imagine travelling to Portugal or Cuba and that 100% of the population you see has diabetes! This sounds like a nightmare to me, and I would assume the same for you if you know the burden this disease represents for health systems. This science fiction scenario is no longer fiction in Mexico, we are one of the most affected countries in the world due to Diabetes. According to the International Diabetes Federation (IDF) it is estimated that in Mexico 11.5 million adults have this disease and by 2040 it will be 20.6 million. That's more than the whole population of Portugal or Cuba.

In fact, Mexico is the first country in the world to declare a national emergency due to the diabetes epidemic. This is unprecedented. Traditional epidemic crises are due to transmissible diseases like influenza or cholera, not a non-communicable disease like diabetes.

This crisis puts a lot of pressure on us to tackle the problem as its impact is really affecting all corners of society.

It is estimated that 30% of patients with diabetes will develop diabetic retinopathy, a complication that at its worse leads to blindness.

Knowing that, it is impossible to not take action. Therefore, salauno, a social enterprise focused on democratising eye health in Mexico, decided to create a joint project with various NGOs via grants (World Diabetes Foundation, Pfizer Foundation and Linked Foundation) to tackle diabetic retinopathy in a high-volume community outreach program. We aim to detect this complication in its early stages when it is still treatable, to prevent blindness. So far, we have screened more than 18,000 patients for free. Every patient that is detected with eye problems is directed to one of the 11 clinics salauno has in the Valley of Mexico, where they will get comprehensive treatments and surgeries if needed at low cost. At the camps, every patient is screened with a non-mydratic camera, counselled and empowered with medical information and offered a more comprehensive consult at one of salauno's clinics.

To keep quality of care and costs down, we have had to rely on technology and artificial intelligence, so we designed our customised EMR where all patient information is stored and allows us to follow the patient throughout their journey.

This program has allowed salauno to serve the most vulnerable populations in the region and is allowing us to strengthen the preventive strategy in an efficient and sustainable manner. We are still improving the programme and aim to integrate computer pattern recognition to scale the project along with the government at a national level.

Some key lessons we have detected over time, is that preparing each camp with time and engaging the allies is crucial to reach the target population. It is also important to say that the poorest patients are the ones that most benefit from the camp, have more pathologies and paradoxically they are the ones who do not hesitate to pay for the treatments.

We are deeply committed to eliminating needless blindness in Mexico and are working to create a solution that allows us to tackle diabetic retinopathy in our megalopolis.

### What is your top management tip?

Lead through example and follow up.

**What would you single out as a career highlight?**

I worked as a physician for one year and six months for Partners in Health at the mountains of Chiapas (poorest state in Mexico), where I understood the connection between effective medicine and social inequities. There I took the decision to shift my career to the healthcare management.

**If you had not chosen this career path you would have become a...?**

Painter

**What are your personal interests outside of work?**

I like to paint in any kind of media (oil, acrylic, watercolour). I also like to read and write, although currently don't have enough time to do it as I wish.

**Your favourite quote?**

We cannot solve our problems with the same thinking we used when we created them. - Albert Einstein

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